

1. MATERIAL INSPECTION AND RECEIVING REPORT (DOMESTIC)		2. FLOW CHART OR PROCEDURE NO.		3. SHEET NO. 1	4. NO. OF SHEETS
5. OFFICE ADMINISTERING CONTRACT		6. INSPECTION OFFICE		7. CREDIT VOUCHER OR FILE NO.	
8. AGENCY PLACING ORDER ON SUPPLIER-CITY-STATE United States Government, Washington, D. C.		9. PRIME CONTRACT OR P. O. NO. BB-475		10. NAME OF PRIME CONTRACTOR-CITY-STATE Itak Laboratories, 225 Needham St., Newton, Massachusetts	
11. SUPPLEMENTS AND CHANGE ORDERS		12. MANUFACTURER OR WAREHOUSE SHIPPED FROM-CITY-STATE		13. ORDER NO. ON SUPPLIER	
14. SHIPPED TO-MARK FOR <div style="border: 1px solid black; width: 200px; height: 50px; margin: 10px auto;"></div> STATINTL		15. PROC. DIR. OR REQUISITION NO.		16. SHIPMENT ORDER NO.	
17. SHIPMENT NUMBER ON CONTRACT A. PARTIAL B. FINAL		18. GROSS WEIGHT		19. NET WEIGHT	
(Accountable Office when different)					
20. DATE SHIPPED 1/20/62	21. SEAL NUMBERS	22. BIL OR REGISTRATION NO.	23. CAR NO.	24. ROUTING	
CONTRACT ITEM NUMBER 25	STOCK AND/OR PART NUMBER AND DESCRIPTION OF ARTICLES (Indicate no. of shipping containers-Type of container-Container no.)		UNIT OF MEAS. 27	QUANTITY SHIPPED 28	QUANTITY RECEIVED 29
#1 Five Inch (5") Test Targets Chargeable to Customer #1					
STATINTL Please pass on to <div style="border: 1px solid black; width: 100px; height: 20px;"></div>					
Received and Accepted: <div style="border: 1px solid black; width: 150px; height: 40px;"></div> Authorized Representative		DOCUMENT NO. 65 NO CHANGE IN CLASS. <input type="checkbox"/> <input type="checkbox"/> DECLASSIFIED CLASS. CHANGED TO: TS 201 NEXT REVIEW DATE: AUTH: BR 7-2		STATINTL	
32. APPROPRIATION		C. ARTICLES SHOWN IN CONTRACT NO. 65 WERE RECEIVED IN APPARENT GOOD CONDITION, EXCEPT AS NOTED DATE: INCHECKER:			
33. INVOICE ROUTING		34. CLASS-CODE	35. ACCOUNT NO.-STORES ACCOUNT	36. DEBIT VOUCHER OR I. R. NO.	
A. I CERTIFY THAT THE ITEMS LISTED HEREIN HAVE BEEN INSPECTED BY ME OR UNDER MY SUPERVISION. THEY CONFORM TO CONTRACT, AND HAVE BEEN ACCEPTED, EXCEPT AS NOTED. DATE: SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		B. I CERTIFY THAT I HAVE RECEIVED AND/OR ACCEPTED THE ARTICLES SHOWN HEREIN (For use on Contract No.) EXCEPT AS NOTED. DATE:			
(Typed name of Inspector)					

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